

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	ltw		02-06-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	FT	926	03-09-01
RESPONSE FORMALITY REVIEW	yph	1030	5-23-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
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If more than 150 claims or 10 actions  
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